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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a 371 of PCT/GB04/01132 03/16/2004

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## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

UNITED KINGDOM 0306357.5 03/20/2003

Foreign Priority claimed	yes <input checked="" type="checkbox"/> no <input type="checkbox"/>	STATE OR COUNTRY MA	SHEETS DRAWING 0	TOTAL CLAIMS 10-2	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met	yes <input checked="" type="checkbox"/> no <input type="checkbox"/>	Met after Allowance Initials			

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## TITLE

Antibacterial oxalidinones

FILING FEE RECEIVED 1030	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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